P	TRANSMITTAL FORM (to be used for all correspondence after initial	filing)	U.S. Pate are required to respond to a collect Application Number Filing Date First Named Inventor Art Unit Examiner Name Attorney Docket Number	10/03 Dece Christ	el Sean Larkin	\ >				
1	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Dr Liu	rawing(s) censing-related Papers etition etition to Convert to a rovisional Application ower of Attorney, Revocation hange of Correspondence Add erminal Disclaimer equest for Refund D, Number of CD(s) s esponse to a First Office Action	ress	After Allowance Communication to a Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):	•				
104	SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm or Individual Signature Date October 10, 2003 CERTIFICATE OF TRANSMISSION/MAILING Thereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Typed or printed Henry E. Naylor Signature Date /9(1/2013)									

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

PTO/SB/17 (10-02)

Approved for use through 10/31/2002. OMB 0651-0032

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TRANSMITTAL for FY 2003

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

1 4 2003

(\$) 475.00 TOTAL AMOUNT OF PAYMENT

Name (Print/Type)

Complete if Known								
Application Number	10/035,796							
Filing Date	12/31/2001							
First Named Inventor	C. J. Rust	_						
Examiner Name	Daniel Sean Larkin							
Art Unit	2856							
Attornov Dooket No.	1 900 1							

METHOD OF PAYMENT (check all that apply)				FE	E CALCULATION (continued)	77			
Check Credit card Money Other None	3. ADDITIONAL FEES CO				S m				
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Deposit Account:	Fee	Fee	Fee	Fee	Ess Desseintion	23. 四			
Account	1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath	Fee Paid			
Number Deposit	1052	50	2052	25		2123			
Account Name	1032	30	2032	23	cover sheet	ال درز			
The Commissioner is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification				
Charge fee(s) indicated below Credit any overpayments	1812		1812		For filing a request for ex parte reexamination	<u> </u>			
Charge any additional fee(s) during the pendency of this application	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action				
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action				
to the above-identified deposit account.	1251	110	2251	55	Extension for reply within first month				
FEE CALCULATION	1252	400	2252		Extension for reply within second month				
1. BASIC FILING FEE	1252	920	2252		Extension for reply within third month	475			
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1254		2254		Extension for reply within fourth month				
Code (\$) Code (\$)	1	-			Extension for reply within fifth month				
1001 740 2001 370 Utility filing fee	1255	•	2255		• •				
1002 330 2002 165 Design filing fee	1401	320	2401		Notice of Appeal				
1003 510 2003 255 Plant filing fee	1402	320	2402		Filing a brief in support of an appeal				
1004 740 2004 370 Reissue filing fee	1403	280	2403		Request for oral hearing	\vdash			
1005 160 2005 80 Provisional filing fee	1451	•		1,510	Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 0	1452	110	2452	55	Petition to revive - unavoidable				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1453	.,	2453		Petition to revive - unintentional				
Fee from Extra Claims below Fee Paid	1501	1,280 460	2501 2502	640	Utility issue fee (or reissue)				
Total Claims 5 -20** = 0 X = 0	1502			230	Design issue fee				
Independent 1 2** - 0 Y	1503	620	2503	310 130	Plant issue fee				
Claims	1460	130	1460		Petitions to the Commissioner				
Large Entity Small Entity	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)				
Fee Fee Fee Fee Description	1806	180	1806	180	Submission of Information Disclosure Stmt				
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	8021	40	8021	40	Recording each patent assignment per property (times number of properties)				
1202 18 2202 9 Claims in excess of 20 1201 84 2201 42 Independent claims in excess of 3	1809	740	2809	370	Filing a submission after final rejection (37 CFR 1.129(a))				
1203 280 2203 140 Multiple dependent claim, if not paid	1810	740	2810	370	For each additional invention to be				
1204 84 2204 42 ** Reissue independent claims					examined (37 CFR 1.129(b))				
over original patent	1801	740	2801	370	, , , , , , , , , , , , , , , , , , , ,				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802	900	Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 0		fee (sp							
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 475								
SUBMITTED BY (Complete (if applicable) 475									

Signature WARNING: Information on this form may become public. Credit card information should not

/Naylor

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Registration No.

(Attornev/Agent)

27,461

Telephone

Date